

**TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION**

Division of Water Resources

William R. Snodgrass Tennessee Tower, 312 Rosa L. Parks Avenue, 11th Floor, Nashville, Tennessee 37243

1-888-891-8332 (TDEC)

Notice of Intent (NOI) for General NPDES Permit for Stormwater Discharges from Construction Activities (TNR100000)

Site or Project Name: Bristol Propane System Gas Line		NPDES Tracking Number: TNR	
Street Address or Location: White Top Rd., SR 394		Construction Start Date: April 3, 2017	
		Estimated End Date: Dec 31, 2018	
Site Description: Roadway right-of-way		Latitude (dd.dddd): 35.5079	
		Longitude (-dd.dddd): -82.2109	
County(ies): Sullivan	MS4 Jurisdiction (if applicable): Bristol, Sullivan	Acres Disturbed: 10.8 0.9 Acre	
		Total Acres: 10.8	
Check the appropriate box(s) if there are streams and/or wetlands on or adjacent to the construction site: Streams <input checked="" type="checkbox"/> Wetlands <input type="checkbox"/> If wetlands are located on-site and may be impacted, attach wetlands delineation report. If an Aquatic Resource Alteration Permit (ARAP) has been obtained for this site, what is the permit number? Application			
Receiving waters: Whitetop Creek			
Attach the SWPPP with the NOI: SWPPP Attached <input checked="" type="checkbox"/>		Attach a site location map: Map Attached <input checked="" type="checkbox"/>	
Site Owner/Developer (Primary Permittee): (Provide person, company, or entity that has operational or design control over construction plans and specifications): Atmos Energy			
For corporate entities only, provide correct Tennessee Secretary of State (SOS) Control Number: 000336515 (an incorrect SOS control number may delay NOI processing)			
Site Owner or Developer Contact Name: (individual responsible for site) Ernie Napier		Title or Position: (the party who signs the certification below) VP Technical Services	
Mailing Address: 810 Crescent Center Dr., Suite 600		City: Franklin	State: TN Zip: 37067
Phone: (615) 771-8300	Fax: (615) 771-8302	E-mail: Ernie.Napier@atmosenergy.com	
Optional Contact: Suzanne Herron, Energy Land & Infrastructure		Title or Position: Project Manager	
Mailing Address: 1420 Donelson Pike, Suite A-12		City: Nashville	State: TN Zip: 37217
Phone: (615) 383-6300	Fax: ()	E-mail: suzanne.herron@eli-llc.com	
Owner/Developer Certification: (must be signed by president, vice-president or equivalent, or ranking elected official) (Primary Permittee)			
I certify under penalty of law that this document and all attachments were prepared by me, or under my direction or supervision. The submitted information is to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.			
Owner/Developer Name: (print/type) Ernie Napier		Signature:	Date: 3-7-2017
Contractor(s) Certification: (must be signed by president, vice-president or equivalent, or ranking elected official) (Secondary Permittee)			
I certify under penalty of law that I have reviewed this document, any attachments, and the SWPPP referenced above. Based on my inquiry of the construction site owner/developer identified above and/or my inquiry of the person directly responsible for assembling this NOI and SWPPP, I believe the information submitted is accurate. I am aware that this NOI, if approved, makes the above-described construction activity subject to NPDES permit number TNR100000, and that certain of my activities on-site are thereby regulated. I am aware that there are significant penalties, including the possibility of fine and imprisonment for knowing violations, and for failure to comply with these permit requirements. As specified in Tennessee Code Annotated Section 39-16-702(a)(4), this declaration is made under penalty of perjury.			
Contractor name, address, and SOS control number (if applicable):		Signature:	Date:
Contractor name, address, and SOS control number (if applicable):		Signature:	Date:

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Received Date:	Reviewer:	Field Office:	Permit Tracking Number: TNR 161858	Exceptional TN Water:
Fee(s):	T & E Aquatic Flora/Fauna:	SOS Corporate Status:	Waters with Unavailable Parameters:	Notice of Coverage Date: